

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) American Crossroads			FEC IDENTIFICATION NUMBER ▼ C C00487363		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			MM / DD / YYYY 10 / 03 / 2012		

Full Name (Last, First, Middle Initial) of Payee MENTZER MEDIA SERVICES INC			Date MM / DD / YYYY 10 / 02 / 2012		
Mailing Address 600 FAIRMOUNT AVENUE STE 306			Amount 1972987.84		
City TOWSON	State MD	Zip Code 21286	Transaction ID : E.001		
Purpose of Expenditure TV / MEDIA PLACEMENT		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 3634503.36			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) of Payee RISING TIDE MEDIA GROUP LLC			Date MM / DD / YYYY 10 / 02 / 2012		
Mailing Address 226 S FAYETTE			Amount 15513.00		
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : E.002		
Purpose of Expenditure TV / MEDIA PRODUCTION		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 3634503.36			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)		

(a) SUBTOTAL of Itemized Independent Expenditures.....	1988500.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1988500.84

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caleb Crosby

[Electronically Filed]

Signature _____ Date MM / DD / YYYY 10 / 05 / 2012